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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006					Docket Number (Optional) 59156-103		
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)							
	Application Number 10/051,876				Filed 01/17/2002		
	For Method for Planning a Repair of Mobile Machines						
Į į	Group Art 3629					Examiner MICHAEL J. FISHER	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):							
		period decinear.	<u>Fee</u>	Small E	ntity Fee	,	
	\boxtimes	One month (37 CFR 1.17(a)(1))	\$120	\$	60	\$ <u>120.00</u>	
		Two months (37 CFR 1.17(a)(2))	\$460	\$	230	\$	
		Three months (37 CFR 1.17(a)(3))	\$1050	\$	525	\$	
		Four months (37 CFR 1.17(a)(4))	\$1640	9	820	\$	
		Five months (37 CFR 1.17(a)(5))	\$2230	\$	\$1115	\$	
	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$						
	A check in the amount of the fee is enclosed.						
	Payment by credit card. Form PTO-2038 is attached.						
	The Director has already been authorized to charge fees in this application to a Deposit Account.						
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number I have enclosed a duplicate copy of this sheet.							
I am the 🔲 applicant/inventor							
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
attorney or agent of record. Registration Number <u>45,437</u> .							
attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
2-28-07							
Date Signature							
	<u>314</u> -4	l <u>80-1500</u>	Robert C.	Haldiman, 45	5,437		
Telephone Number Typed or Printed Name						ne	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							

☐ Total of ______ forms are submitted.